

ROTHBURY RURAL DISTRICT COUNCIL

Annual Report of the Medical Officer of Health for the Year 1952

Major Browne, Ladies and Gentlemen.

I beg to present my report for the year 1952.

The area of the Rural District is 167.186 acres, and the estimated population 5574 compared with 5507 for 1951, an increase of 67.

The number of births was 187 (excluding 3 still-births). Of these 103 were from other districts leaving 84 belonging to the district. Omitting the births belonging to other districts the birth rate per 1000 was 15.0, that for England and Wales being 15.3. In each case there was a slight fall compared with the previous year.

There were 3 still births and 6 illegitimate births.

One hundred and sixty births took place at the Cottage Hospital which continues to carry on its good work.

The number of Deaths belonging to the District was 69, including 19 transferable from other districts where they died and were registered. This gives a death rate of 12.3 per 1,000, that for England and Wales being 11.

There were no deaths of infants under one year of age and none of infants under four weeks and none due to pregnancy, childbirth or abortion. There were no deaths due to measles or whooping cough. One death was due to accident but none to motor-vehicle accidents or suicide.

Twenty-four persons died between the ages of 70 and 80, sixteen between 80 and 90 and four over 90.

The chief causes of death were :-

Diseases of the heart and circulatory system 37  
Cancer 11, an increase of 4, the average number  
for the past 10 years being just over 9.

Infectious Diseases. One hundred and forty cases were notified during the year under review compared with two hundred and ninety two for the previous year, a drop of one hundred and forty nine. Eleven of these were institutional leaving one hundred and thirty two to this district. They were classified as follows:-

Measles	62
Whooping Cough	20
Pneumonia	17
Dysentery	15
Scarlet Fever	12
Erysipelas	11
Cellulitis	4
Puerperal Pyrexia	1
Acute meningitis	1

Total 143

Tuberculosis. Three cases were notified, two being pulmonary and the third acute tubercular meningitis (which proved fatal) in an infant of 14 months. This is a very gratifying reduction. The average yearly number of notifications for the last 10 years is 7.2. At the end of the year 1952 there were 27 cases on my register, 21 relating to the lungs.



Water Supplies and Sewerage. The Sanitary Inspector to whom I am greatly obliged has sent me this report:-

Water Supplies All supplies under the direct control of the Council have again been satisfactory.

The new supply for the Village of Hepple is still under consideration. Your Engineers Messrs. Waterhouse & Rounthwaite have been instructed to prepare a comprehensive scheme of supply for the entire district and the provision of a storage tank for the Village of Longframlington.

No major extensions to water mains have been made other than to serve houses under construction.

The Council supply approximately 60% of the population.

Sewerage: No changes have taken place during the year. The conversion of 30 privies at Embleton Terrace will be undertaken early in the new year, notices having been served on the owners. Seven grants of financial assistance have been given to private owners for privy conversions.

While the scheme of sewerage and sewage disposal for the Village of Whittingham has been approved by the Ministry no starting date has yet been given.

Your Engineers have prepared a scheme of sewers and sewerage disposal for the Village of Longframlington.

Housing: During the year 20 houses were built by the Council and three by private persons.

Advantage of financial help towards the improvement of houses under the Housing Act, 1949 was taken in 12 cases.

The demand for Council house tenancies shows no sign of diminishing but the high cost of building and its resulting high rentals may have its repercussions.

#### Commentary:

The salient features of these statistics are (1) the increase of the estimated population, (2) the increase of the deaths from cancer, (3) the decrease of the notifications of Tuberculosis and (4) the decrease of the number of ordinary infectious diseases.

Regarding population, we hear much of the drift of the agricultural workers to the towns and with the increasing mechanisation of farm work it will continue, but in a healthy and beautiful district such as ours the loss of farm workers is more than cancelled by the number of people who, on retirement from business decide to make their homes in the many pleasant villages of this rural district. The young countryman who deserts the country for the town may find heavier pay-packets, greater leisure and more excitement, but as he grows older I think in many cases he may crave for the quiet, peace and satisfaction of country life, far from the maddening crowd.

The increase in cases of cancer is disconcerting being well over the average for the last 10 years. Smoking as a cause of cancer of the lung is accepted by some medical writers but it is by no means proved. The Cancer Research Organisation is well supported in this country and the money is well spent in finding a means of conquering this terrible scourge.

On the other hand the decrease in the cases of Tuberculosis is encouraging. This decrease is taking place in all parts of the country and in my view many factors are contributing to it, chiefly earlier diagnosis as a result of X-Ray examinations, more beds available in sanatoria, better housing conditions and less overcrowding and greater consumption of good milk especially by children. I believe we are exceptionally fortunate in our milk supply in this district, both in quantity and quality.

Cases of Infectious Disease show a reduction of fifty per cent which is very satisfactory but this is largely due to the fact that in the previous year we had several epidemics causing a record of 292 cases notified and therefore we must not be too complacent. No case of diphtheria has occurred for 6 years when we had a few cases at the Land Girls Hostel at Thropton where the cause was not of local origin. Our percentage of immunisations against diphtheria is exceedingly good but we must keep it up. The average in the country generally is falling and was only about 31 per cent in 1952, the result of complacency and ignorance of the facts. Our percentage, so far as I can ascertain is around 90. The Poliomyelitis figures are not satisfactory, four cases in 1952. In 1945 we had one, in 1948 one, in 1949 one, in 1950 three cases. I still think that infection of food by flies, especially bluebottles is a possible cause and therefore I hope housewives will cover their food in the pantry at any rate in the second half of the year.

In conclusion I would say that this rural district has taken on a "new look" during the last two or three years and in my opinion this all round improvement is due very largely to the inspiration, initiative and interest of the lady members of the Council, combined with regular attendance; and I would go further and express the hope that their numbers may increase as the years pass by.

But I would mention two blemishes on the features of Rothbury. First that piece of ground known as the Malting Yard which is mercifully hidden from view by an erection which may be useful but is, by no means ornamental on the front street. For some years this wilderness has been the happy hunting ground of hens, and so the Malting Yard becomes the 'Moulting Yard'.

The second blemish is the litter nuisance which is by no means confined to Rothbury but is found in every village "on the bus route". Can anything be done about it by the District Council? In my opinion nothing more than is being done at present. The roadmen cannot spend all their time sweeping and until these thoughtless people, male and female, young and old, learn better manners public authorities must go on cleaning up the mess.

I am convinced that the members of this Council have as their objective the health, happiness and welfare of the community.

(Signed) A.S. HEDLEY.

18th August, 1953



